

United States District Court
for
Middle District of Tennessee

Report on Offender Under Supervision

Name of Offender: Moises Silva

Case Number: 3:09-00150-08

Name of Sentencing Judicial Officer: Honorable Todd J. Campbell, U.S. District Judge

Date of Original Sentence: July 13, 2011

Original Offense: 21 U.S.C. 846, Conspiracy to Distribute and Possess with Intent to Distribute
Five Kilograms or More of Cocaine

Original Sentence: 46 months' custody followed by 5 years' supervised release

Type of Supervision: Supervised Release

Date Supervision Commenced: February 22, 2013

Assistant U.S. Attorney: Brent A. Hannafan

Defense Attorney: Michael Terry

THE COURT ORDERS:

- ☒ No Action at this time
- ☐ The Issuance of a Warrant
- ☐ Sealed Pending Warrant Execution
(cc: U.S. Probation and U.S. Marshal only)
- ☐ The Issuance of a Summons
- ☐ Other

Considered this 22 day of March, 2013,
and made a part of the records in the above case.



Todd J. Campbell
U.S. District Judge

I declare under penalty of perjury
that the foregoing is true and correct.
Respectfully submitted,



Kara Sanders
U.S. Probation Officer

Place Nashville, Tennessee

Date March 22, 2013

ALLEGED VIOLATIONS

The probation officer believes that the offender has violated the following condition(s) of supervision:

<u>Violation No.</u>	<u>Nature of Noncompliance</u>
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1.	<u>The defendant shall not commit another federal, state or local crime.</u>
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On March 6, 2013, at approximately 6:00 a.m. Mr. Silva was arrested in Columbia, Tennessee and charged with two counts of Contributing to the Delinquency of a Minor. The arrest report is attached for Your Honor's review.

The Maury County Sheriff's Department responded to a suspicious vehicle call at 2430 Steve Drive, Columbia, Tennessee. Sheriff's Deputy Webster responded and the two males in the vehicle reported they were "waiting on a guy they were picking up." Officer Webster was aware there were two juvenile females who resided at the residence and he approached the house to check their welfare. The grandmother of the females answered the door. She allowed Deputy Webster to search the home and Mr. Silva was found hiding in a closet in the bedroom where a 15 year-old and 17 year-old female were residing. The females denied knowing he was in the home, but it was discovered later that they were with Mr. Silva at a party the previous evening and he returned home with them around 5:00 a.m. Mr. Silva is 28 years-old. Both of the females were charged with curfew violations and one with underage consumption.

Mr. Silva did report the arrest after bonding out of custody. He reported for a drug test on March 7, 2013, and was negative for illegal substances, however, did admit to drinking alcohol on or about March 6, 2013. His next Court date is April 3, 2013.

Compliance with Supervision Conditions and Prior Interventions:

Moises Silva began his term of supervised release on February 22, 2013, and is scheduled to terminate supervision on February 21, 2018.

He resides in Columbia, Tennessee with his sister, Maria Silva, and reports he is looking for employment. Mr. Silva has a mental health evaluation pending with Centerstone Mental Health in Columbia, Tennessee. He did attend mental health and substance abuse treatment, with the Evelyn Frye Center, during his Bureau of Prisons confinement at Dierson Charities from August 2012 to February 2013.

U.S. Probation Officer Recommendation:

It is respectfully requested that no action be taken at this time and Mr. Silva be allowed to continue on supervision. However, these violations may be considered in the future, if necessary. Any conviction on the reported charges or future violations will be promptly reported to the Court.

The U.S. Attorney's Office concurs with the probation officer's recommendation.

Approved:



Britton Shelton
Supervisory U.S. Probation Officer

WITNESS	WITNESS #1 NAME: (LAST, MIDDLE, FIRST)		RESIDENIAL PHONE:
	ADDRESS (STREET, CITY, ZIP)		BUSINESS PHONE:
	WITNESS #2 NAME: (LAST, MIDDLE, FIRST)		RESIDENIAL PHONE:
	ADDRESS (STREET, CITY, ZIP)		BUSINESS PHONE:
COMPL	NAME: (LAST, MIDDLE, FIRST) Unknown caller to ecom		RESIDENIAL PHONE:
	ADDRESS (STREET, CITY, ZIP)		BUSINESS PHONE:
NARRATIVE	<p>On this date I was dispatched to Steve Drive in regards to a suspicious vehicle in the road. Upon my arrival I found a vehicle partially in the roadway occupied by two males. As I spoke to them they advised they were waiting on a guy they were picking up from a residence. They pointed to 2430 Steve Drive. They advised all they know is the guy is called "Mo". The driver of the vehicle advised he had contact with "Mo" via text. I told the driver to tell "Mo" to come outside. As I adressed the situation in the street, a good period of time passed and "Mo" did not come out.</p> <p>2430 Steve Drive is a house I am familiar with due to a previous call. I remembered it had at least two juvenile females who lived with their dad. There was no vehicle in the drive way which led me to believe dad was not home. After speaking to Sgt Voss I approached the house to check welfare. I was greeted at the door by a female who was the juveniles grandmother. She advised there was no one at the house but allowed me to come in and check. She took me to the back bedroom where I found two females 15 and 17 years old laying in bed with the light on. The didn't know anything about "Mo" being at the house. I opened the closet to find Moises Silva hiding. Silva advised me that he was 28 years old. I place Silva in hand cuffs and advised him he was being detained at 05:45. He was not officially arrested until 06:22. As I spoke to him and the two females they tried to not say anything. With the help of the subjects in the street I learned that Silva had been at a party that night with the two females. He brought them home to one of the girls houses on Steve drive around 05:00. I spoke to the father of the house. He advised he had no knowledge that his daughter had snuck out to the party. He also said he did not know Silva was in his house nor was he welcome. I spoke to the other females mother over the phone. She did not know that her daughter was at the house on Steve Drive. She was furious to find out her daughter was there. Furthermore, she did not know her daughter was at a party or know who Silva was.</p> <p>Silva was arrested with two counts of contributing to the delinquency of a minor and taken to the jail. Both females were charged with curfew violations and one with underage consumption. See also report 2013-c-09555. End of report</p>		

OFFENDER / ARRESTEE	NUMBER OF OFFENDER (S) : 1				OFFENDER ARRESTED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				ARREST DATE 03/06/2013											
	IF MORE THEN (1) OFFENDER, PROVIDE ADDITIONAL INFORMATION ON SUPPLEMENT SHEET																			
	OFFENDER # 1		(LAST) Silva		(FIRST) Moises		(MIDDLE)		HOME PHONE (931) 398-8726											
	ADDRESS [REDACTED]				CITY Columbia		STATE Tn		ZIP 38401		WORK PHONE									
	DOB [REDACTED]/1983		AGE 29	HEIGHT 5'10"	WEIGHT 180	EYE Bro	HAIR Blk	DRIVER'S LICENSE # 094162009		STATE Tn	SSN [REDACTED]5377									
	SEX M <input checked="" type="checkbox"/> MALE F <input type="checkbox"/> FEMALE U <input type="checkbox"/> UNKNOWN		RACE W <input checked="" type="checkbox"/> WHITE B <input type="checkbox"/> BLACK I <input type="checkbox"/> INDIAN A <input type="checkbox"/> ASIAN U <input type="checkbox"/> UNKNOWN		ADDITIONAL DESCRIPTION (CLOTHING) SCARS / MARKS / TATTOOS MISC															
	ARRESTEE ARMED WITH (CHECK UP TO TWO) ENTER A IN BOX IF AUTOMATIC 01 <input checked="" type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM (TYPE NOT STATED) 12 <input type="checkbox"/> HANDGUN 13 <input type="checkbox"/> RIFLE				TYPE OF ARREST O <input checked="" type="checkbox"/> ON-VIEW S <input type="checkbox"/> SUMMONED / CITED T <input type="checkbox"/> TAKEN INTO CUSTODY				DISPOSITION OF ARRESTEE UNDER 18: H <input type="checkbox"/> HANDLED WITHIN DEPARTMENT R <input type="checkbox"/> REFERRED TO OTHER AUTHORITIES TIBRS OFFENSE CODE (S) 1. 90z 3. 5. 2. 4.											
	ARRESTEE ETHNICITY: H <input checked="" type="checkbox"/> HISPANIC N <input type="checkbox"/> NON-HISPANIC U <input type="checkbox"/> UNKNOWN		RESIDENT STATUS: R <input checked="" type="checkbox"/> RESIDENT N <input type="checkbox"/> NON-RESIDENT U <input type="checkbox"/> UNKNOWN		MULTIPLE CLEARANCE INDICATOR M <input type="checkbox"/> MULTIPLE C <input type="checkbox"/> COUNT ARRESTEE N <input checked="" type="checkbox"/> NOT APPLICABLE		WAS THERE EVIDENCE SEIZED IN THIS CASE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, COMPLETE PROPERTY SEGMENT													
	FINGERPRINT CARD NO:																			
	NUMBER OF VICTIM (S) : 2																			
VICTIM	IF MORE THEN (1) VICTIM, PROVIDE ADDITIONAL INFORMATION ON SUPPLEMENT SHEET				IS THE VICTIM ALSO THE COMPLAINANT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO															
	VICTIM # 1		(LAST) Indermuehle		(FIRST) Jennifer		(MIDDLE)		HOME PHONE (931) 223-5616											
	ADDRESS [REDACTED]				CITY Columbia		STATE Tn		ZIP 38401		WORK PHONE									
	DOB [REDACTED]1995		AGE 17	HEIGHT	WEIGHT	EYE	HAIR	DRIVER'S LICENSE #		STATE	SSN									
	TYPE OF VICTIM (CHECK ONLY ONE) I <input checked="" type="checkbox"/> INDIVIDUAL B <input type="checkbox"/> BUSINESS F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT L <input type="checkbox"/> LAW ENFORCEMENT OFFICIAL				RACE W <input checked="" type="checkbox"/> WHITE B <input type="checkbox"/> BLACK I <input type="checkbox"/> INDIAN A <input type="checkbox"/> ASIAN U <input type="checkbox"/> UNKNOWN		SEX M <input type="checkbox"/> MALE F <input checked="" type="checkbox"/> FEMALE U <input type="checkbox"/> UNKNOWN		RESIDENT STATUS: R <input checked="" type="checkbox"/> RESIDENT N <input type="checkbox"/> NON-RESIDENT U <input type="checkbox"/> UNKNOWN		ETHNICITY: H <input type="checkbox"/> HISPANIC N <input checked="" type="checkbox"/> NON-HISPANIC U <input type="checkbox"/> UNKNOWN									
	AGGRAVATED ASSAULT / HOMICIDE CIRCUMSTANCES: 01 <input type="checkbox"/> ARGUMENT 02 <input type="checkbox"/> ASSAULT ON LAW OFFICER 03 <input type="checkbox"/> DRUG DEALING 04 <input type="checkbox"/> GANGLAND 05 <input type="checkbox"/> JUVENILE GANG				06 <input type="checkbox"/> LOVERS' QUARREL 07 <input type="checkbox"/> MERCY KILLING 08 <input type="checkbox"/> OTHER FELONY INVOLVED 09 <input type="checkbox"/> OTHER CIRMSTANCES 10 <input type="checkbox"/> UNKNOWN CIRMSTANCES				INJURY TYPE (CHECK UP TO FIVE) N <input checked="" type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONES I <input type="checkbox"/> POSS. INT. INJURY L <input type="checkbox"/> SEVERE LACERATION				M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS							
	RELATIONSHIP OF VICTIM TO OFFENDER SE <input type="checkbox"/> SPOUSE CS <input type="checkbox"/> COMMON-LAW SPOUSE PA <input type="checkbox"/> PARENT SB <input type="checkbox"/> SIBLING CH <input type="checkbox"/> CHILD				GP <input type="checkbox"/> GRANDPARENT GC <input type="checkbox"/> GRANDCHILD IL <input type="checkbox"/> IN-LAW SP <input type="checkbox"/> STEP PARENT SC <input type="checkbox"/> STEP CHILD				SS <input type="checkbox"/> STEP SIBLING OF <input type="checkbox"/> OTHER FAMILY AQ <input checked="" type="checkbox"/> ACQUAINTANCE FR <input type="checkbox"/> FRIEND NE <input type="checkbox"/> NEIGHBOR				BE <input type="checkbox"/> BABYSITTEE (BABY) BG <input type="checkbox"/> BOY / GIRL FRIEND CF <input type="checkbox"/> CHILD OF "B/G" ABOVE HH <input type="checkbox"/> HOMOSEXUAL REL. XS <input type="checkbox"/> EX-SPOUSE							
	EE <input type="checkbox"/> EMPLOYEE ER <input type="checkbox"/> EMPLOYER OK <input type="checkbox"/> OTHERWISE KNOWN ST <input type="checkbox"/> STRANGER VO <input type="checkbox"/> VICTIM WAS OFFENDER RU <input type="checkbox"/> RELATIONSHIP UNKNOWN				IS THE VICTIM A COLLEGE STUDENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO DID OFFENSE OCCUR ON CAMPUS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO COL: DOMESTIC VIOLENCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO VICTIM TRANSPORTED TO SAFE PLACE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO DID INCIDENT INVOLVE A VIOLATION OF AN ORDER OF PROTECTION <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				NEGLIGENT MANSLAUGHTER (CHECK ONE) 30 <input type="checkbox"/> CHILD PLAYING WITH GUN 31 <input type="checkbox"/> GUN CLEANING ACCIDENT 32 <input type="checkbox"/> HUNTING ACCIDENT 33 <input type="checkbox"/> OTHER NEGLIGENT WEAPON HANDLING 34 <input type="checkbox"/> OTHER NEGLIGENT KILLING				JUSTIFIABLE HOMICIDE (CHECK ONE) 20 <input type="checkbox"/> CRIMINAL KILLED BY PRIVATE CITIZEN 21 <input type="checkbox"/> CRIMINAL KILLED BY POLICE OFFICER / LAW ENFORCEMENT OFFICIAL				JUSTIFIABLE HOMICIDE CIRCUMSTANCES (CHECK ONE) A <input type="checkbox"/> ATTACKED POLICE OFFICER & THAT OFFICER KILLED CRIMINAL B <input type="checkbox"/> ATTACKED OFFICER & FELLOW OFFICER KILLED CRIMINAL C <input type="checkbox"/> CRIMINAL ATTACKED A CIVILIAN D <input type="checkbox"/> ATTEMPTED FLIGHT FROM A CRIME E <input type="checkbox"/> KILLED IN COMMISSION OF A CRIME F <input type="checkbox"/> RESISTED ARREST G <input type="checkbox"/> UNABLE TO DETERMINE / NOT ENOUGH INFORMATION			
	WARRANT SIGNED BY (DOMESTIC VIOLENCE ONLY) <input type="checkbox"/> OFFICER <input type="checkbox"/> VICTIM <input type="checkbox"/> BOTH																			
	CASE # 021229_395382119																			

OFFENDER / ARRESTEE	NUMBER OF OFFENDER (S) : _____					OFFENDER ARRESTED <input type="checkbox"/> YES <input type="checkbox"/> NO		ARREST DATE			
	IF MORE THEN (1) OFFENDER, PROVIDE ADDITIONAL INFORMATION ON SUPPLEMENT SHEET										
	OFFENDER #	(LAST)		(FIRST)		(MIDDLE)		HOME PHONE			
	Same as above										
	ADDRESS					CITY	STATE	ZIP	WORK PHONE		
	DOB	AGE	HEIGHT	WEIGHT	EYE	HAIR	DRIVER'S LICENSE #	STATE	SSN		
		0									
	SEX M <input type="checkbox"/> MALE F <input type="checkbox"/> FEMALE U <input type="checkbox"/> UNKNOWN		RACE W <input type="checkbox"/> WHITE B <input type="checkbox"/> BLACK I <input type="checkbox"/> INDIAN A <input type="checkbox"/> ASIAN U <input type="checkbox"/> UNKNOWN		ADDITIONAL DESCRIPTION (CLOTHING) SCARS / MARKS / TATTOOS MISC						
	ARRESTEE ARMED WITH (CHECK UP TO TWO) ENTER A IN BOX IF AUTOMATIC 01 <input type="checkbox"/> UNARMED 14 <input type="checkbox"/> SHOTGUN 11 <input type="checkbox"/> FIREARM 15 <input type="checkbox"/> OTHER FIREARM (TYPE NOT STATED) 16 <input type="checkbox"/> LETHAL CUTTING INSTRUMENT 12 <input type="checkbox"/> HANDGUN (E.G SWITCH BLADE, KNIFE, ECT.) 13 <input type="checkbox"/> RIFLE 17 <input type="checkbox"/> CLUB / BLACKJACK, BRASS KNUCKLES					TYPE OF ARREST O <input type="checkbox"/> ON-VIEW S <input type="checkbox"/> SUMMONED / CITED T <input type="checkbox"/> TAKEN INTO CUSTODY		DISPOSITION OF ARRESTEE UNDER 18: H <input type="checkbox"/> HANDLED WITHIN DEPARTMENT R <input type="checkbox"/> REFERRED TO OTHER AUTHORITIES TIBRS OFFENSE CODE (S) 1. _____ 3. _____ 5. _____ 2. _____ 4. _____			
	ARRESTEE ETHNICITY: H <input type="checkbox"/> HISPANIC N <input type="checkbox"/> NON-HISPANIC U <input type="checkbox"/> UNKNOWN		RESIDENT STATUS: R <input type="checkbox"/> RESIDENT N <input type="checkbox"/> NON-RESIDENT U <input type="checkbox"/> UNKNOWN		MULTIPLE CLEARANCE INDICATOR M <input type="checkbox"/> MULTIPLE C <input type="checkbox"/> COUNT ARRESTEE N <input type="checkbox"/> NOT APPLICABLE		WAS THERE EVIDENCE SEIZED IN THIS CASE <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, COMPLETE PROPERTY SEGMENT				
FINGERPRINT CARD NO:											
VICTIM	NUMBER OF VICTIM (S) : 2					IF MORE THEN (1) VICTIM, PROVIDE ADDITIONAL INFORMATION ON SUPPLEMENT SHEET IS THE VICTIM ALSO THE COMPLAINANT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
	VICTIM #	(LAST)		(FIRST)		(MIDDLE)		HOME PHONE			
	2	Kelley		Breanna		Paige		(931) 223-5744			
	ADDRESS					CITY	STATE	ZIP	WORK PHONE		
	2430 SWEET DRIVE					Columbia	Tn	38401			
	DOB	AGE	HEIGHT	WEIGHT	EYE	HAIR	DRIVER'S LICENSE #	STATE	SSN		
	1997	15									
	TYPE OF VICTIM (CHECK ONLY ONE) I <input checked="" type="checkbox"/> INDIVIDUAL R <input type="checkbox"/> RELIGIOUS B <input type="checkbox"/> BUSINESS S <input type="checkbox"/> SOCIETY / PUBLIC F <input type="checkbox"/> FINANCIAL O <input type="checkbox"/> OTHER G <input type="checkbox"/> GOVERNMENT U <input type="checkbox"/> UNKNOWN L <input type="checkbox"/> LAW ENFORCEMENT OFFICIAL		RACE W <input checked="" type="checkbox"/> WHITE B <input type="checkbox"/> BLACK I <input type="checkbox"/> INDIAN A <input type="checkbox"/> ASIAN U <input type="checkbox"/> UNKNOWN		SEX M <input type="checkbox"/> MALE F <input checked="" type="checkbox"/> FEMALE U <input type="checkbox"/> UNKNOWN		RESIDENT STATUS: R <input checked="" type="checkbox"/> RESIDENT N <input type="checkbox"/> NON-RESIDENT U <input type="checkbox"/> UNKNOWN		ETHNICITY: H <input type="checkbox"/> HISPANIC N <input checked="" type="checkbox"/> NON-HISPANIC U <input type="checkbox"/> UNKNOWN		
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